

**BENEFICIARY DATA FORM**  
**July 1, 2006 – June 30, 2007**

AGENCY: \_\_\_\_\_

PROGRAM: \_\_\_\_\_

CONTRACT/ACTIVITY No.: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

REPORTING PERIOD: \_\_\_\_\_

NUMBER OF PERSONS SERVED WHO ARE															
TOTAL NO. OF PERSONS	LOW INCOME	VERY LOW INCOME	EXTREMELY LOW INCOME	WHITE	BLACK/AFRICAN AMERICAN	ASIAN	AMERICAN INDIAN/ALASKAN NATIVE	NATIVE HAWAIIAN/OTHER PACIFIC ISLANDER	AMERICAN INDIAN ALASKAN NATIVE & WHITE	ASIAN & WHITE	AM INDIAN/ALASKAN NATIVE & BK/AFRICAN AMERICAN	ASIAN/PACIFIC ISLANDER	OTHER MULTI-RACIAL	HISPANIC	FEMALE HEAD OF HOUSEHOLD
REPORTING TOTAL															
YEAR TO DATE															
NUMBER OF PERSONS PER FAMILY															
LOW INCOME	1	2	3	4	5	6	7	8							
	\$41,700	\$47,700	\$53,650	\$59,600	\$64,350	\$69,150	\$73,900	\$78,650							
REPORTING TOTAL															
YEAR TO DATE															
NUMBER OF PERSONS PER FAMILY															
VERY LOW INCOME	1	2	3	4	5	6	7	8							
	\$28,050	\$32,100	\$36,100	\$40,100	\$43,300	\$46,500	\$49,700	\$52,950							
REPORTING TOTAL															
YEAR TO DATE															
NUMBER OF PERSONS PER FAMILY															
EXTREMELY LOW INCOME	1	2	3	4	5	6	7	8							
	\$16,850	\$19,250	\$21,650	\$24,050	\$25,950	\$27,900	\$29,800	\$31,750							
REPORTING TOTAL															
YEAR TO DATE															